

ESH-2 FAQs

What type of injury/illness should be reported to ESH-2?

All injuries and/or illnesses should be reported to ESH-2 for evaluation regardless of severity.

When should I report an injury/illness?

Injuries and/or illnesses should be reported to ESH-2 as soon as possible.

Why should I report all incidents immediately?

In cases of ergonomic illness, prompt intervention generally reduces the severity and therefore the duration of treatment. Early intervention usually = short treatment duration and usually results in no OSHA recordability. If the problem is recognized and reported early, treatment plans will likely include the following:

- over-the-counter medication
- recommendations (take frequent breaks, maintain correct posture, stretches) rather than restrictions)
- night splints (for wrist complaints)

These treatments are very effective for mild complaints. Furthermore, these treatments do not “make” the illness/injury OSHA recordable.

I am a sub-contract worker, to whom do I report an injury/illness?

All workers at the Laboratory, whether UC or subcontract should report to ESH-2 unless the incident is an emergency. If the worker reports to the Emergency Room first, at least one follow-up visit to ESH-2 should occur as soon as reasonably possible. It is important that all workers report through ESH-2 so that the institution as a whole has some idea of the types of incidents occurring on premise. Depending upon the subcontractor, the worker may be followed from that point by another provider outside the Laboratory.

What are signs I note to indicate an ergonomic problem?

If you have aches, pains, fatigue, stiffness, numbness, tingling or just feel uncomfortable while performing your work, you should report to ESH-2 for an evaluation. Remember, early intervention is the key to a quick recovery and identification of safety or ergonomic issues.

How do ESH-2 providers determine a treatment plan?

Treatment plans are based on findings revealed during the medical evaluation. Early intervention generally leads to more basic treatment of short duration. If you have questions regarding your treatment, please feel free to talk with the provider and have all your questions answered. **TIP:** Bring written questions with you to ESH-2 to ensure all questions are asked and answered.

Does reporting an injury/illness to ESH-2 automatically create a recordable for the Laboratory?

Reporting to ESH-2 to be evaluated for an illness or injury does NOT automatically make that illness or injury recordable (for instance, less than 1/3 of work-related cases seen in the clinic become recordable). It is the circumstances of the occurrence, the nature and severity of the resulting illness or injury, the treatment and work restrictions initiated that are considered. **PLEASE DO NOT AVOID APPROPRIATE MEDICAL CARE BECAUSE OF CONCERN ABOUT RECORDABILITY** – better to catch both the problem and the cause early. **Safety First!**

What is the difference between OSHA recordability and Worker Comp compensability?

OSHA recordability and Work Comp compensability are determined using completely different sets of criteria.

OSHA recordability requirements were established by the Bureau of Labor and Statistics to maintain records for types of incidents occurring in the workplace. Recordability questions should be directed to John Vance at 5-6191 or Paula Mattys at 7-9949.

Worker Compensation law was designed as a type of “no fault” insurance to provide compensation to those injured during the course of their work. Each state has its own law establishing compensability criteria. Workers’ Compensation questions should be directed to Sylvia Herrera at 5-4142.

Can an injury sustained at home, but seen at ESH-2, become a recordable for the Laboratory?

No. Injuries or illnesses which occur outside of work (non-work related) are not OSHA recordable. **NOTE:** Administrative procedures necessitate reporting through ESH-2 to evaluate need for restricted work activities and to determine if you are able to perform your work safely.